



REDACTED - FOR PUBLIC INSPECTION

June 30, 2015

Ms. Marlene H. Dortch, Secretary
Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554

Re: Connect America Fund, WC Docket No. 14-58, 47 CFR § 54.313 Annual Reporting Requirements for High-Cost Recipients (Form 481)

Dear Ms. Dortch:

Attached please find Laurel Highland Telephone Company's (LHTC) high-cost support recipient annual report pursuant to 47 CFR § 54.313 (Form 481).

LHTC is filing certain financial information, reported pursuant to 47 CFR § 54.313(f)(2), as confidential under the November 16, 2012 Protective Order (DA 12-1857). Pursuant to that Order, each page of this filing has been marked "REDACTED - FOR PUBLIC INSPECTION." The non-redacted version of this information has been marked "CONFIDENTIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, 14-58, GN DOCKET NO. 09-51, CC DOCKET NOS. 01-92, 96-45, WT DOCKET NO. 10-208 BEFORE THE FEDERAL COMMUNICATIONS COMMISSION." As such, LHTC requests that the non-redacted version of its submission be withheld from public inspection.

LHTC is also requesting confidential treatment of certain information being filed pursuant to 47 CFR § 54.202(a)(1)(ii) and 54.313(a)(1) (five year service quality improvement plan) under 47 CFR § 0.457 and 0.459. The redacted version of this filing has been marked "REDACTED - FOR PUBLIC INSPECTION." The non-redacted version has been marked "CONFIDENTIAL - NOT FOR PUBLIC INSPECTION."

Pursuant to 47 CFR § 0.459, LHTC offers the following in support of its request for confidential treatment of certain information.

- *Identification of the specific information for which confidential treatment is sought:* LHTC seeks confidential treatment of the five year service quality improvement plan required per 47 CFR § 54.202(a)(1)(ii) and 54.313(a)(1),
- *Identification of the Commission proceeding in which the information was submitted or a description of the circumstances giving rise to the submission:* LHTC is providing the five year service quality improvement plan as part of its annual high-cost support recipient report per 47 CFR § 54.313.
- *Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged:* LHTC considers the information to be highly sensitive in that it contains

statements about the Company's future investment plans, and discusses specific equipment and strategies the Company will utilize to provide services.

- *Explanation of the degree to which the information concerns a service that is subject to competition:* LHTC provides voice and broadband services that are in competition with various landline and wireless providers; thus, the investment data disclosed is related to services subject to competition to a high degree.
- *Identification of any measures taken by the submitting party to prevent unauthorized disclosure:* LHTC makes the data being provided available only to employees, consultants, and attorneys on a limited, need-to-know basis.
- *Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties:* The information is not publicly available.
- *Justification of the period during which the submitting party asserts that material should not be available for public disclosure:* LHTC requests that the data provided be treated as confidential indefinitely. Due to the sensitive nature of the data, it would not be appropriate for public disclosure at any time in the foreseeable future.
- *Any other information that the party seeking confidential treatment believes may be useful in assessing whether its request for confidential treatment should be granted:* None.

Accordingly, LHTC requests confidential treatment of the five year service quality improvement plan pursuant to section 0.457 and 0.459 of the Commission's rules.

The redacted version of this Form 481 submission will be filed via the Commission's Electronic Comment Filing System (ECFS) in the above-captioned docket.

If you have any questions about this filing, please contact the undersigned.

Sincerely,



James J Kail

Attachment

cc: Charles Tyler
Telecommunications Access Policy Division
Wireline Competition Bureau
Federal Communications Commission
445 12th Street, S.W., Room 5-A452
Washington, DC 20554

<010> Study Area Code	170179
<015> Study Area Name	LAUREL HIGHLAND TEL
<020> Program Year	2016
<030> Contact Name: Person USAC should contact with questions about this data	Patricia A Yoders
<035> Contact Telephone Number: Number of the person identified in data line <030>	7247223331 ext.
<039> Contact Email Address: Email of the person identified in data line <030>	payoders@lhtot.com

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ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
		(check box when complete)	
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input type="checkbox"/> <- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	<input type="text"/> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	<input type="text"/> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 170179PA510.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 170179PA610.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability Certification	Yes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010> 170179PA1010.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Certify whether terrestrial backhaul options exist (Yes or No)	<input checked="" type="radio"/> Yes <input type="radio"/> No (if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet			
<2000> Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet			
<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

(100) Service Quality Improvement Reporting
Data Collection FormFCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	170179
<015>	Study Area Name	LAUREL HIGHLAND TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Patricia A. Yoders
<035>	Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	payoders@lhtot.com

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<110> Has your company received its ETC certification from the FCC? (yes / no) ☐ ☒

If your answer to Line <110> is yes, do you have an existing § 54.202(a) "5 year plan" filed with the FCC? (yes / no) ☐ ☐

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

170179BA100.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113> Maps detailing progress towards meeting plan targets

<114> Report how much universal service (USF) support was received

<115> How much (USF) was used to improve service quality and how support was used to improve service quality

<116> How much (USF) was used to improve service coverage and how support was used to improve service coverage

<117> How much (USF) was used to improve service capacity and how support was used to improve service capacity

<118> Provide an explanation of network improvement targets not met in the prior calendar year.

Yes
Yes
Yes
Yes
Yes
Yes

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[illegible]

<010>	Study Area Code	1701179
<015>	Study Area Name	LABEL: HIGHLAND TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Patricia A Yodera
<035>	Contact Telephone Number - Number of person identified in data line <030>	724722331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	payodera@hst.ten

[illegible]

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See attached worksheet

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0988 (OMB Control No. 3060-0819)
2013

<010> Study Area Code 170179
<015> Study Area Name LAUREL HIGHLAND TEL
<020> Program Year 2016
<030> Contact Name - Person USAC should contact regarding this data Patricia A. Yoders
<035> Contact Telephone Number - Number of person identified in data line <030> 7247223131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> payoders@lhtot.com

<810> Reporting Carrier Laurel Highland Telephone Company
<811> Holding Company Laurel Highland Total Communications, Inc.
<812> Operating Company Laurel Highland Telephone Company

<813>	<a1>	<a2>	<a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation

-- See attached worksheet --

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(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986 (OMB Control No. 3060-0819
July 2013)

<010> Study Area Code	170179
<015> Study Area Name	LAMREL HIGHLAND TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Patricia A Yodera
<035> Contact Telephone Number - Number of person identified in data line <030>	7247222131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	payodera@lhtot.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning.
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

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(1100) No Terrestrial Backhaul Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986 OMB Control No. 3060-0819
July 2013

<010> Study Area Code	170179
<015> Study Area Name	LAUREL HIGHLAND TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Patricia A Yeders
<035> Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	payeders@lhtot.com

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

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(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986 (OMB Control No. 3060-0819
July 2013)

<010> Study Area Code	170179
<015> Study Area Name	LAUREL HIGHLAND TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Patricia A Yodanis
<035> Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	payodanis@lhtot.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP <http://www.patel.org/tariffs/laurelhighland/tariff-149-STAX.pdf>

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETOs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

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(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	170377
<015>	Study Area Name	UNION TELEPHONE
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	PAULINE A. TOSKE
<035>	Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	payson@att.net

State the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental Connected America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connected America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

- Incremental Connected America Phase I reporting
- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))
- <2011a> 3rd Year Certification (47 CFR § 54.313(b)(1)(i))
- <2011b> Attachment (47 CFR § 54.313(b)(1)(ii))

Name of Attached Document(s) Listing Required Information

- Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))
- <2012> 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))
- <2013> 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))
- <2014> 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))
- <2015> 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))

- Price Cap Carrier Connected America ICC Support (47 CFR § 54.313(d))
- <2016> Certification Support Used to Build Broadband

- Connected America Phase II Reporting (47 CFR § 54.313(e))
- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification

- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document(s) Listing Required Information

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(3000) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481
OMB Control No. 3000-0080/OMB Control No. 3000-0019
July 2013

<010> Study Area Code 170179
<015> Study Area Name LAUREL HIGHLAND TEL
<020> Program Year 2013
<030> Contact Name - Person USPC should contact regarding this data Patricia A. Yoder
<035> Contact Telephone Number - Number of person identified in data line <030> 7247222131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> paycorra@1stnet.com

I, the undersigned, certify that the information reported on this form and in the documents attached below is accurate.
OR § 54.313(f)(2) I further certify that the information reported on this form and in the documents attached below is accurate.

- (310) Progress Report on 5 Year Plan
Milestone Certification (47 CFR § 54.313(f)(1)(i))

170179PA3010.pdf

Name of Attached Document Listing Required Information

- (311) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313(f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☒

170179PA3012.pdf

- (312) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

- (313) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))
(314) If yes, does your company file the RUS annual report

(Yes/No) ☒ (Yes/No) ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

- (315) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☐
(316) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

- (317) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

- (318) If the response is no on line 3014, is your company audited?

(Yes/No) ☒ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (319) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications ☒

- (320) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☒

- (321) Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit ☒

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (322) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers ☐

- (323) Underlying information subjected to a review by an independent certified public accountant ☐

- (324) Underlying information subjected to an office certification ☐

- (325) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

170179PA3026.pdf

- (326) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

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(3000) Rate Of Return Carrier Additional Documentation (Continued)
Data Collection Form

FCC Form 491
OMB Control No. 3060-0866/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	170179
<015> Study Area Name	JANET, HIGHLAND TEL
<020> Program Year	2016
<030> Contact Name - Person USCA should contact regarding this data	Patricia A. Teders
<035> Contact Telephone Number - Number of person identified in data line <030>	7247273131 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	patricia@hntel.com

Financial Data Summary

(3027) Revenue
(3028) Operating Expenses
(3029) Net Income
(3030) Telephone Plant In Service (TPIS)
(3031) Total Assets
(3032) Total Debt
(3033) Total Equity
(3034) Dividends

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Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986; OMB Control No. 3060-0819 July 2013
<010> Study Area Code	170179	
<015> Study Area Name	LAUREL HIGHLAND TEL	
<020> Program Year	2016	
<030> Contact Name - Person USAC should contact regarding this data	Patricia A Yoders	
<035> Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	payoders@lhtot.com	

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier, my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients, and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	LAUREL HIGHLAND TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/23/2016
Printed name of Authorized Officer:	James Hall
Title or position of Authorized Officer:	President & CEO
Telephone number of Authorized Officer:	7245932411 ext.
Study Area Code of Reporting Carrier:	170179 Filing Due Date for this form: 07/01/2016
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 55502, 5503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3000-0080 (OMB Control No. 3000-0019 July 2013)
<010> Study Area Code	170179	
<015> Study Area Name	LAUREL HIGHLAND TEL	
<020> Program Year	2016	
<030> Contact Name - Person USAC should contact regarding this data	Patricia A. Yodanis	
<035> Contact Telephone Number - Number of person identified in data line <030>	7247223131 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	payodanis@htel.com	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or U Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or U Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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Attachments

[illegible]

[illegible]

Laurel Highland Telephone Company
Five Year Service Quality Improvement Plan Progress Report
For the 2015 Reporting Year
Per 47 CFR § 54.313(a)(1)

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Laurel Highland Telephone Company (SAC 170179)

Statement Regarding Compliance with Service Quality Standards and Consumers Protection Rules
47 CFR § 54.313(a)(5)
Form 481, Line 510

Laurel Highland Telephone Company (LHTC) is an incumbent local exchange carrier operating in the state of Pennsylvania, and is an eligible telecommunications carrier (ETC) designated by the Pennsylvania Public Utility Commission (PUC). As such, LHTC is subject to the regulatory authority of the PUC and operates under the relevant rules and laws of the state of Pennsylvania.

LHTC is subject to the service quality standards and consumer protection standards adopted by the Pennsylvania Public Utilities Commission that are applicable to ILECs in our state. These standards are contained in Section 63.51 through 63.65 of The Pennsylvania Code.

Apart from effective internal procedures and operations, LHTC ensures compliance with all applicable service quality and consumer protection rules as defined by the PUC which entails the operation of an effective customer complaint process. LHTC is required to respond to customer complaints and other service quality-related inquiries from the PUC in a reasonable time frame. LHTC consistently meets or exceeds all PUC standards, and reports to this effect via all required PUC filings.

LHTC has established internal procedures to ensure compliance with the Federal Communications Commission's Customer Proprietary Network Information (CPNI) rules that include, but are not limited to, periodic employee training and maintenance of written company CPNI procedures. LHTC certifies its compliance with the Commission's CPNI rules by making annual filings as required in 47 CFR § 64.2009(e).



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Laurel Highland Telephone Company (SAC 170179)

Statement Regarding the Ability to Function in Emergency Situations

47 CFR § 54.313(a)(6)

Form 481, Line 610

Laurel Highland Telephone Company (LHTC) is an incumbent local exchange carrier operating in the state of Pennsylvania, and is an eligible telecommunications carrier (ETC) designated by the Pennsylvania Public Utility Commission (PUC). LHTC is subject to the regulatory authority of the PUC and operates under the relevant rules and laws of the state of Pennsylvania.

LHTC has 6 portable generators capable of providing the required level of backup power, and that can be deployed as necessary to Laurel's switching and remote sites. Laurel's network is capable of rerouting traffic around damaged facilities, although this ability is not absolute and may be limited in certain circumstances. However, Laurel follows all industry standard practices in ensuring its network remains functional during different types of emergency situations.



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Statement Regarding Certification of Voice Rate Comparability
47 C.F.R. § 54.313(a)(10)
Form 481, Line 1010

Laurel Highland Telephone Company (LHTC) is a rural, rate of return regulated incumbent local exchange carrier operating in the state of Pennsylvania, and is an eligible telecommunications carrier (ETC) designated by the Pennsylvania Public Commission (PUC). As such, LHTC is subject to the regulatory authority of the PUC and operates under the relevant rules and laws of the state of Pennsylvania.

LHTC hereby certifies that the pricing of its voice services is no more than two standard deviations above the national average urban rate for voice service, \$47.48, as specified in the April 16, 2015, Public Notice issued by the Wireline Competition Bureau of the Federal Communications Commission.

LHTC's residential voice service rates, including state fees and the federal subscriber line charge (SLC) are as follows.

Monthly rate for exchange 455 is \$22.23.
Monthly rate for exchange 593 is \$20.28.
Average monthly rate is \$21.26.



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FOR PUBLIC INSPECTION

Laurel Highland Telephone Company (SAC 170179)

Statement Regarding the Ability to Provide Service upon Reasonable Request

47 CFR 54.313(f)(1)(i)

Form 481, Line 3010

Laurel Highland Telephone Company hereby certifies pursuant to 47 CFR 54.313(f)(1)(i) that it is taking all reasonable steps to provide, upon reasonable request, broadband service at actual speeds of at least 4 mbps downstream and 1 mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas, and that requests for such service are met within a reasonable time frame.



REDACTED
FOR PUBLIC INSPECTION

Laurel Highland Telephone Company (SAC 170179)

Statement Regarding the Ability to Provide Service to Anchor Institutions in 2014
47 CFR 54.313(f)(1)(ii)
Form 481, Line 3012

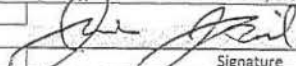
Laurel Highland Telephone Company (LHTC) did not begin providing broadband service to any community anchor institutions during 2014. LHTC had previously provided broadband service meeting the Commission's public interest obligation standards to all community anchor institutions in its study area and, to the company's knowledge, no new community anchor institutions began operating in the company's study area during 2014.

(3005a) Operating Report for Privately-Held Rate of Return Carriers		FCC Form 481
Balance Sheet - Data Collection Form		OMB Control No. 3060-0986
Page 1 of 3		July 2013
<010> Study Area Code		<010> 170179
<015> Study Area Name		<015> Laurel Highlands Telephone Company
<020> Program Year		<020> 2016
<030> Contact Name - Person USAC should contact regarding this data		<030> Patricia A Yoders
<035> Contact Telephone Number - Number of person identified in data line <030>		<035> 724 722-3131
<039> Contact Telephone Email Address - Email Address of person identified in data line <030>		<039> payoders@lhtot.com
<input type="checkbox"/> Filed as reviewed single company		<input type="checkbox"/> Filed as audited single company
<input type="checkbox"/> Filed as reviewed consolidated company		<input type="checkbox"/> Filed as audited consolidated company
<input type="checkbox"/> Filed as subsidiary of reviewed consolidated company		<input checked="" type="checkbox"/> Filed as subsidiary of audited consolidated company

**REDACTED
FOR PUBLIC INSPECTION**

CERTIFICATION

We hereby certify that the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief.

 Signature	6/23/16 Date
--	-----------------

PART A. BALANCE SHEET

ASSETS		BALANCE PRIOR YEAR	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY		BALANCE PRIOR YEAR	BALANCE END OF PERIOD
CURRENT ASSETS				CURRENT LIABILITIES			
1.	Cash and Equivalents			25.	Accounts Payable		
2.	Cash-RUS Construction Fund			26.	Notes Payable		
3.	Affiliates:			27.	Advance Billings and Payments		
a.	Telecom, Accounts Receivable			28.	Customer Deposits		
b.	Other Accounts Receivable			29.	Current Mat. L/T Debt		
c.	Notes Receivable			30.	Current Mat. L/T Debt-Rur. Dev.		
4.	Non-Affiliates:			31.	Current Mat.-Capital Leases		
a.	Telecom, Accounts Receivable			32.	Income Taxes Accrued		
b.	Other Accounts Receivable			33.	Other Taxes Accrued		
c.	Notes Receivable			34.	Other Current Liabilities		
5.	Interest and Dividends Receivable			35.	Total Current Liabilities (25 thru 34)	0	0
6.	Material-Regulated			LONG-TERM DEBT			
7.	Material-Nonregulated			36.	Funded Debt-RUS Notes		
8.	Prepayments			37.	Funded Debt-RTB Notes		
9.	Other Current Assets			38.	Funded Debt-FFB Notes		
10.	Total Current Assets (1 Thru 9)	0	0	39.	Funded Debt-Other		
NONCURRENT ASSETS				40.	Funded Debt-Rural Develop. Loan		
11.	Investment in Affiliated Companies			41.	Premium (Discount) on L/T Debt		
a.	Rural Development			42.	Reacquired Debt		
b.	Nonrural Development			43.	Obligations Under Capital Lease		
12.	Other Investments			44.	Adv. From Affiliated Companies		
a.	Rural Development			45.	Other Long-Term Debt		
b.	Nonrural Development			46.	Total Long-Term Debt (36 thru 45)	0	0
13.	Nonregulated Investments			OTHER LIAB. & DEF. CREDITS			
14.	Other Noncurrent Assets			47.	Other Long-Term Liabilities		
15.	Deferred Charges			48.	Other Deferred Credits		
16.	Jurisdictional Differences			49.	Other Jurisdictional Differences		
17.	Total Noncurrent Assets (11 thru 16)	0	0	50.	Total Other Liabilities and Deferred Credits (47 thru 49)	0	0
PLANT, PROPERTY, AND EQUIPMENT				EQUITY			
18.	Telecom, Plant-in-Service			51.	Cap. Stock Outstanding & Subscribed		
19.	Property Held for Future Use			52.	Additional Paid-in-Capital		
20.	Plant Under Construction			53.	Treasury Stock		
21.	Plant Adj., Nonop. Plant & Goodwill			54.	Membership and Cap. Certificates		
22.	Less Accumulated Depreciation			55.	Other Capital		
23.	Net Plant (18 thru 21 less 22)	0	0	56.	Patronage Capital Credits		
				57.	Retained Earnings or Margins		
				58.	Total Equity (51 thru 57)	0	0
24.	TOTAL ASSETS (10+17+23)	0	0	59.	TOTAL LIABILITIES AND EQUITY (35+46+50+58)	0	0

REDACTED
 FOR PUBLIC INSPECTION

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<010> 170179
 <015> Laurel Highlands Telephone Company
 <020> 2016
 <030> Patricia A Yoders
 <035> 724 722-3131
 <039> payoders@lhtot.com

PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS			
ITEM	PRIOR YEAR	THIS YEAR	
1. Local Network Services Revenues			
2. Network Access Services Revenues			
3. Long Distance Network Services Revenues			
4. Carrier Billing and Collection Revenues			
5. Miscellaneous Revenues			
6. Uncollectible Revenues			
7. Net Operating Revenues (1 thru 5 less 6)	0	0	
8. Plant Specific Operations Expense			
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)			
10. Depreciation Expense			
11. Amortization Expense			
12. Customer Operations Expense			
13. Corporate Operations Expense			
14. Total Operating Expenses (8 thru 13)	0	0	
15. Operating Income or Margins (7 less 14)	0	0	
16. Other Operating Income and Expenses			
17. State and Local Taxes			
18. Federal Income Taxes			
19. Other Taxes			
20. Total Operating Taxes (17+18+19)	0	0	
21. Net Operating Income or Margins (15+16-20)	0	0	
22. Interest on Funded Debt			
23. Interest Expense - Capital Leases			
24. Other Interest Expense			
25. Allowance for Funds Used During Construction			
26. Total Fixed Charges (22+23+24-25)	0	0	
27. Nonoperating Net Income			
28. Extraordinary Items			
29. Jurisdictional Differences			
30. Nonregulated Net Income			
31. Total Net Income or Margins (21+27+28+29+30-26)	0	0	
32. Total Taxes Based on Income			
33. Retained Earnings or Margins Beginning-of-Year			
34. Miscellaneous Credits Year-to-Date			
35. Dividends Declared (Common)			
36. Dividends Declared (Preferred)			
37. Other Debits Year-to-Date			
38. Transfers to Patronage Capital			
39. Retained Earnings or Margins end-of-Period [(31+33+34)-(35+36+37+38)]	0	0	
40. Patronage Capital Beginning-of-Year			
41. Transfers to Patronage Capital			
42. Patronage Capital Credits Retired			
43. Patronage Capital End-of-Year (40+41-42)	0	0	
44. Annual Debt Service Payments			
45. Cash Ratio [(14+20-11)/7]	0.00	0.00	
46. Operating Accrual Ratio [(14+20+26)/7]	0.00	0.00	
47. TIER [(31+26)/26]	0.00	0.00	
48. DSCR [(31+26+10+11)/44]	0.00	0.00	

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PART C. STATEMENTS OF CASH FLOWS			
1.	Beginning Cash (Cash and Equivalents plus RUS Construction Fund)		
CASH FLOWS FROM OPERATING ACTIVITIES			
2.	Net Income		
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities			
3.	Add: Depreciation		
4.	Add: Amortization		
5.	Other (Explain)	GAIN ON DISPOSAL OF ASSETS	
Changes in Operating Assets and Liabilities			
6.	Decrease/(Increase) in Accounts Receivable		
7.	Decrease/(Increase) in Materials and Inventory		
8.	Decrease/(Increase) in Prepayments and Deferred Charges		
9.	Decrease/(Increase) in Other Current Assets		
10.	Increase/(Decrease) in Accounts Payable		
11.	Increase/(Decrease) in Advance Billings & Payments		
12.	Increase/(Decrease) in Other Current Liabilities		
13.	Net Cash Provided/(Used) by Operations		0
CASH FLOWS FROM FINANCING ACTIVITIES			
14.	Decrease/(Increase) in Notes Receivable		
15.	Increase/(Decrease) in Notes Payable		
16.	Increase/(Decrease) in Customer Deposits		
17.	Net Increase/(Decrease) in Long Term Debt (Including Current Maturities)		
18.	Increase/(Decrease) in Other Liabilities & Deferred Credits		
19.	Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital		
20.	Less: Payment of Dividends		
21.	Less: Patronage Capital Credits Retired		
22.	Other (Explain)		
23.	Net Cash Provided/(Used) by Financing Activities		0
CASH FLOWS FROM INVESTING ACTIVITIES			
24.	Net Capital Expenditures (Property, Plant & Equipment)		
25.	Other Long-Term Investments		
26.	Other Noncurrent Assets & Jurisdictional Differences		
27.	Other (Explain)		
28.	Net Cash Provided/(Used) by Investing Activities		0
29.	Net Increase/(Decrease) in Cash		0
30.	Ending Cash		0